



Association of Connecticut Ambulance Providers

Aetna Ambulance :- Ambulance Service of Manchester :- American Ambulance Service
American Medial Response :-Campion Ambulance Service :- Hunter's Ambulance Service

Testimony of
David D. Lowell, President
Association of Connecticut Ambulance Providers

Public Health Committee

Friday, March 12, 2010

Senator Harris, Representative Ritter and distinguished members of the Committee.

My name is David Lowell. I am President of the Association of Connecticut Ambulance Providers.

I am speaking today on behalf of our membership in opposition of section 23 of Raised Bill No. 428, ***An Act Concerning Revisions to the Public Health Statutes.***

It is our position that the language as written in this section makes unclear and jeopardizes the integrity of the certificate of need process currently in place. The Department of Public Health has cooperatively worked with our industry to modify the language and a copy of the mutually agreed upon language is attached.

Connecticut's Emergency Medical Services System is a balanced network of volunteer, municipal, private and not-for-profit service providers. The system was developed in the 1970's to provide structure and set quality standards for the delivery of emergency medical care and transportation. The system has the integrity of high quality care and vehicle and equipment safety accountability through three related and essential components of our regulations:

- Certificate of Need Process.
- Rate Setting and Regulations.
- Primary Service Area Assignments.

Maintaining the integrity of the Certificate of Need process is essential. The language (as amended) continues to promote efficiency of process while allowing for the proper review and oversight of the balance of Connecticut's EMS system.

In closing, I urge the committee to not support section 23 as written and instead support the substitute language as presented in the attached document.

Respectfully Submitted,

David D. Lowell
President

Sec. 23. Section 19a-180 of the 2010 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2010*):

(a) No person shall operate any ambulance service, rescue service or management service or otherwise transport in a motor vehicle a patient on a stretcher without either a license or a certificate issued by the commissioner. No person shall operate a commercial ambulance service or commercial rescue service or a management service without a license issued by the commissioner. A certificate shall be issued to any volunteer or municipal ambulance service which shows proof satisfactory to the commissioner that it meets the minimum standards of the commissioner in the areas of training, equipment and personnel. No license or certificate shall be issued to any volunteer, municipal or commercial ambulance service, rescue service or management service, as defined in subdivision (19) of section 19a-175, as amended by this act, unless it meets the requirements of subsection (e) of section 14-100a. Applicants for a license shall use the forms prescribed by the commissioner and shall submit such application to the commissioner accompanied by an annual fee of two hundred dollars. In considering requests for approval of permits for new or expanded emergency medical services in any region, the commissioner shall consult with the Office of Emergency Medical Services, [and the emergency medical services council of such region and] The commissioner shall hold a public hearing for new or expanded emergency medical services applications to determine the necessity for such services. Written notice of such hearing shall be given to current providers in the geographic region where such new or expanded services would be implemented, provided, any volunteer ambulance service which elects not to levy charges for services rendered under this chapter shall be exempt from the provisions concerning requests for approval of permits for new or expanded emergency medical services set forth in this subsection. A primary service area responder that operates in the service area identified in the application shall,

upon request, be granted intervenor status with opportunity for cross-examination. Each applicant for licensure shall furnish proof of financial responsibility which the commissioner deems sufficient to satisfy any claim. The commissioner may adopt regulations, in accordance with the provisions of chapter 54, to establish satisfactory kinds of coverage and limits of insurance for each applicant for either licensure or certification. Until such regulations are adopted, the following shall be the required limits for licensure: (1) For damages by reason of personal injury to, or the death of, one person on account of any accident, at least five hundred thousand dollars, and more than one person on account of any accident, at least one million dollars, (2) for damage to property at least fifty thousand dollars, and (3) for malpractice in the care of one passenger at least two hundred fifty thousand dollars, and for more than one passenger at least five hundred thousand dollars. In lieu of the limits set forth in subdivisions (1) to (3), inclusive, of this subsection, a single limit of liability shall be allowed as follows: (A) For damages by reason of personal injury to, or death of, one or more persons and damage to property, at least one million dollars; and (B) for malpractice in the care of one or more passengers, at least five hundred thousand dollars. A certificate of such proof shall be filed with the commissioner. Upon determination by the commissioner that an applicant is financially responsible, properly certified and otherwise qualified to operate a commercial ambulance service, rescue service or management service, the commissioner shall issue the appropriate license effective for one year to such applicant. If the commissioner determines that an applicant for either a certificate or license is not so qualified, the commissioner shall notify such applicant of the denial of the application with a statement of the reasons for such denial. Such applicant shall have thirty days to request a hearing on the denial of the application.

(b) Any person, management service organization or emergency medical service organization which does not maintain standards or violates regulations adopted

under any section of this chapter applicable to such person or organization may have such person's or organization's license or certification suspended or revoked or may be subject to any other disciplinary action specified in section 19a-17 after notice by certified mail to such person or organization of the facts or conduct which warrant the intended action. Such person or emergency medical service organization shall have an opportunity to show compliance with all requirements for the retention of such certificate or license. In the conduct of any investigation by the commissioner of alleged violations of the standards or regulations adopted under the provisions of this chapter, the commissioner may issue subpoenas requiring the attendance of witnesses and the production by any medical service organization or person of reports, records, tapes or other documents which concern the allegations under investigation. All records obtained by the commissioner in connection with any such investigation shall not be subject to the provisions of section 1-210 for a period of six months from the date of the petition or other event initiating such investigation, or until such time as the investigation is terminated pursuant to a withdrawal or other informal disposition or until a hearing is convened pursuant to chapter 54, whichever is earlier. A complaint, as defined in subdivision (6) of section 19a-13, shall be subject to the provisions of section 1-210 from the time that it is served or mailed to the respondent. Records which are otherwise public records shall not be deemed confidential merely because they have been obtained in connection with an investigation under this chapter.

(c) Any person, management service organization or emergency medical service organization aggrieved by an act or decision of the commissioner regarding certification or licensure may appeal in the manner provided by chapter 54.

(d) Any person guilty of any of the following acts shall be fined not more than two hundred fifty dollars, or imprisoned not more than three months, or be both fined and imprisoned: (1) In any application to the commissioner or in any

proceeding before or investigation made by the commissioner, knowingly making any false statement or representation, or, with knowledge of its falsity, filing or causing to be filed any false statement or representation in a required application or statement; (2) issuing, circulating or publishing or causing to be issued, circulated or published any form of advertisement or circular for the purpose of soliciting business which contains any statement that is false or misleading, or otherwise likely to deceive a reader thereof, with knowledge that it contains such false, misleading or deceptive statement; (3) giving or offering to give anything of value to any person for the purpose of promoting or securing ambulance or rescue service business or obtaining favors relating thereto; (4) administering or causing to be administered, while serving in the capacity of an employee of any licensed ambulance or rescue service, any alcoholic liquor to any patient in such employee's care, except under the supervision and direction of a licensed physician; (5) in any respect wilfully violating or failing to comply with any provision of this chapter or wilfully violating, failing, omitting or neglecting to obey or comply with any regulation, order, decision or license, or any part or provisions thereof; (6) with one or more other persons, conspiring to violate any license or order issued by the commissioner or any provision of this chapter.

(e) No person shall place any advertisement or produce any printed matter that holds that person out to be an ambulance service unless such person is licensed or certified pursuant to this section. Any such advertisement or printed matter shall include the license or certificate number issued by the commissioner.

(f) Each licensed or certified ambulance service shall secure and maintain medical oversight, as defined in section 19a-179, as amended by this act, by a sponsor hospital, as defined in section 19a-179, as amended by this act, for all its emergency medical personnel, whether such personnel are employed by the ambulance service or a management service.

(g) Each applicant whose request for new or expanded emergency medical services is approved shall, not later than six months after the date of such approval, acquire the necessary resources, equipment and other material necessary to comply with the terms of the approval and operate in the service area identified in the application. If the applicant fails to do so, the approval for new or expanded medical services shall be void and the commissioner shall rescind the approval.

(h) Notwithstanding the provisions of subsection (a) of this section, any licensed or certified ambulance service that seeks to increase the level of clinical care provided by such organization from basic life support to advanced life support may apply to the commissioner to increase such level of clinical care on such forms prescribed by the commissioner. The application shall include, but not be limited to: (1) The name of the ambulance service; (2) the names of the chief executive officer, the emergency medical service medical director and the emergency medical service coordinator of such organization; (3) the sponsor hospital of such organization; (4) the level of clinical care that the organization seeks to provide; (5) a copy of the organization's current patient treatment guidelines; (6) a copy of the organization's quality assurance activities and quality improvement activities; (7) a personnel roster that contains the names and licensure or certification status of those employees who are qualified to provide the level of clinical care referred to in the application; and (8) a copy of the organization's professional liability insurance or other indemnity against liability for professional malpractice. The chief executive officer of the ambulance services organization shall attest to the accuracy of the information contained in an application submitted to the Office of Emergency Medical Services pursuant to this subsection. Upon making such application, the applicant shall notify, in writing, all other primary service area responders in any municipality or abutting municipality in which the applicant operates. Except in the case where

a primary service area responder entitled to receive notification of such application objects, in writing, to the commissioner no later than fifteen calendar days after receiving such notice, the commissioner shall have thirty days from the date of filing the application to either approve or reject the application and provide the applicant with written notification of such determination. Written notification of any application that is rejected by the commissioner shall contain the reasons for the rejection. If any such primary service area responder entitled to receive notification of the application files an objection with the commissioner within the fifteen calendar day time period and requests a hearing, the applicant shall be required to demonstrate need at a public hearing as required under subsection (a) of this section.

[(h)] (i) Notwithstanding the provisions of subsection (a) of this section, any volunteer, hospital-based or municipal ambulance service that is licensed or certified and is a primary service area responder may apply to the commissioner to add one emergency vehicle to its existing fleet every three years, on a short form application prescribed by the commissioner. No such volunteer, hospital-based or municipal ambulance service may add more than one emergency vehicle to its existing fleet pursuant to this subsection regardless of the number of municipalities served by such volunteer, hospital-based or municipal ambulance service. Upon making such application, the applicant shall notify in writing all other primary service area responders in any municipality or abutting municipality in which the applicant proposes to add the additional emergency vehicle. Except in the case where a primary service area responder entitled to receive notification of such application objects, in writing, to the commissioner not later than fifteen calendar days after receiving such notice, the application shall be deemed approved thirty calendar days after filing. If any such primary service area responder files an objection with the commissioner within the fifteen-calendar-day time period and requests a hearing, the applicant shall be

required to demonstrate need at a public hearing as required under subsection (a) of this section.

[(i)] (j) The commissioner shall develop a short form application for primary service area responders seeking to add an emergency vehicle to their existing fleets pursuant to subsection [(h)] (i) of this section. The application shall require an applicant to provide such information as the commissioner deems necessary, including, but not limited to, (1) the applicant's name and address, (2) the primary service area where the additional vehicle is proposed to be used, (3) an explanation as to why the additional vehicle is necessary and its proposed use, (4) proof of insurance, (5) a list of the providers to whom notice was sent pursuant to subsection [(h)] (i) of this section and proof of such notification, and (6) total call volume, response time and calls passed within the primary service area for the one-year period preceding the date of the application.

(k) Notwithstanding the provisions of subsection (a) of this section, any licensed or certified ambulance service that seeks to initiate billing services may apply to the commissioner on such forms prescribed by the commissioner. The application shall include but not be limited to: (1) The name of the ambulance service; (2) the names of the chief executive officer, the emergency medical service medical director and the emergency medical service coordinator of such organization; (3) the sponsor hospital of such organization; (4) the levels of clinical care provided by the organization; (5) the primary service area of the organization; (6) the number and type of emergency vehicles in the organization's fleet; (7) a copy of the organization's workers' compensation policy; (8) a copy of the organization's professional liability insurance or other indemnity against liability for professional malpractice; (9) written justification for the request to bill for service; and (10) proof of notice sent to bordering communities to the primary service area and the regional emergency medical services councils. Upon making such application, the applicant shall notify, in

writing, all other primary service area responders in any municipality or abutting municipality in which the applicant operates. Except in the case where a primary service area responder entitled to receive notification of such application objects, in writing, to the commissioner no later than fifteen calendar days after receiving such notice, the commissioner shall have thirty days from the date of filing the application to either approve or reject the application and provide the applicant with written notification of such determination. Written notification of any application that is rejected by the commissioner shall contain the reasons for the rejection. If any such primary service area responder entitled to receive notification of the application files an objection with the commissioner within the fifteen calendar day time period and requests a hearing, the applicant shall be required to demonstrate need at a public hearing as required under subsection (a) of this section. The provisions of this subsection shall not apply to a management service, as defined in section 19a-175, as amended by this act.